# INNOCENCE LOST

## A FREUDIAN ESSAY ON CHILDHOOD SEXUAL ABUSE

# INNOCENCE LOST

BY

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## Introduction

This is a short work I have formulated to introduce individuals to Sigmund Freud's monumental work on neurology titled *Project for a Scientific Psychology* (+ other work) where he hypothesized the mechanical functionality of the brain and its processes such as Long-Term Potentiation (Long-term memory storage), the existence of Synapses (Contact-Barriers: mediators of Repression), and the mechanical explanation for mental illness.

I connect Freud's *Project* to his earliest theories on libido, such as the *Seduction Theory* which describes Childhood Sexual Trauma as an extremely common causer in the development of mental derangement.

It is essential that all who read this work also read his *Project*, for the explanations and descriptions that are contained herein will seem dubious or illogical to the ignorant individuals who have only read Freud topically or listened to biased lectures on his work in college. It is also important to read his Complete Works, most importantly Volume I, where he discovers, after Josef Breuer, the sexual basis of every neurosis, and the "talking cure".

Considering Freud's *Project*, wherein he accurately predicted what scientists later termed "Long-Term Potentiation"[0], and "Synapses", there is absolutely no need for me to argue in favor of the intelligence and potential truth behind his earliest psychological theories. If you hold *animosity* towards Freud, and therefore find yourself unable to take seriously, at the very least, his incredibly impressive foray into neuroscience, within his *Project*, then you should stay clear of all psychological or neurological sciences until you discover why exactly you hate your father.

Strangely, my book Inflammation Cycling is interconnected to this short work, considering seizure-induced neurodegeneration occurs through two primary processes occurring after excitotoxicity called Necroptosis and Pyroptosis, which describe *inflammation-induced cell death*. These processes stimulate the release of inflammatory factors in the brain, primarily TNF-a, IL-6, & IL-1B.

I will explain that psychology was never my study of choice as a younger man, but because of the traumatic events described to me by family members, coupled with the deranged libido I developed growing up (pornography addiction), I felt it necessary to begin studying psychology, specifically from Freud and Breuer, who both understand the underlying mechanical aspect to all psychological issues. Growing up, owing to antisocial tendencies, I would seek out friends on random chat websites, predominately Omegle, this was my original way to sublimate my libido, to gamble my time with each new chat. Through talking to tens of thousands of people, predominately young adults & teenagers, I came to recognize certain patterns, the first being that the most mentally unwell females had experienced CSA in earlier life, these persons being predominately the hyposexual type of Color Libinist. I did not document most of my chats with these females because at that period of my life I was in a similar place of Synaptic Dysfunction, not due to CSA, but from numerous other physical and psychological compounding factors—I too was lost in the chaos of entropy. I did however realize over time that perversion is not a side effect of a collapsing civilization, it is the precise poison that destroys a civilization from the inside out. It was during this period of time, where I desperately sought out feminine attention, that I learned the value in sublimation, without being able to label it, as I often understand complex concepts first unconsciously, and then consciously.

Another striking pattern that I found was that many self-identifying homosexual young men and women were molested (as self-reported) by the same sex as children, which lends credit to the Freudian view that we are born with bisexual tendencies, and through instinctual extinction, social pressures, and civilizational requirements, we overcome these early life desires. If a child is considered malleable, and their libidos can be shaped by childhood sexual experiences, and if Free Will exists through microtubule dynamics, I believe I can logically and safely argue that for self-identifying homosexual or bisexual men or women there exists a truth that must be confronted; Were they born that way, or were they corrupted by perversion at a very young age? If I am correct in suggesting that certain cases, but possibly not all, of sexual deviations beyond the norm, are a result of childhood sexual abuse,

then this changes the landscape of sexuality. For if even 5% of homo/bisexuality cases in persons can be accurately traced back to CSA, then being "prideful" of the result is not only illogical, but one of worst forms of Conscious Entropy, and this will invariably lead back to the source act. The retort to this would be "if it doesn't hurt anyone, let it be", but that is precisely how evil (Conscious Entropy) goes unpunished in this world, and when I refer to evil I am referring to those who harm children. A child must be offered a free choice of who or what they become, they must not be told "you are born this way", as this is antiquated determinism—the facilitator of perversion. To admit that a community was, is, and will continue to be formed with individuals who were abused as children, or with those who abuse children, will take courage, not from me, but from its members.

The overall goal of this work is not to criticize those who identify as homosexual, or bisexual, as the original sexual error (sin) originates from heterosexuality (Man > Girl / Man - Woman = Original Paraphilia). The goal of this work, however, is to describe the dangers in allowing your child to use the internet without moderation, to leave them alone around sexual deviants, to allow their souls to be damaged through parental indifference. Being a stay at home mother may seem draconian or backwards to some, but in a world full of Sexual Entropy Operators, it is a necessity to protect your child.

Research on the psychological development of aberrant sexualities will never be funded nor approved in modern nations because to do so would prove an attack on the Egos of those who exist in perpetual psychosexual static. To reach this point of wisdom in my life I have had to renunciate and repress all of the filth that corrupted me as a younger man, to render extinct my corrupted childhood libido, to learn to sublimate effectively, even if erratically. To teach a child that sexualities and their *attributed* colors are for experimentation is to brainwash them into believing that through sexual experimentation—kink / fetishes—hedonism is the ultimate path of self-expression and creativity, which disfigures the original purpose of life, that being to control our instincts, to move past animalism and towards a return to innocence i.e. creativity devoid of sexuality.

## Chapter 1

Brief Explanations of Sigmund Freud's work on Neurology from his paper Project for a Scientific Psychology:

- The brain is composed of neurons, which are types of nerve cells.
- Memories are patterns of neural activity, of actions potentials and synaptic strength between neurons.
- "Magnitudes" in *Project* are most likely to be understood as Action Potentials, or Neurotransmitters. I prefer Action Potentials because they are electrical signals that activate nervous tissue (neurons, muscle tissue, etc.), and Neurotransmitters cause the generation of Action Potentials. For simplicity of understanding I will primarily use the term "electricity", or "energy" to describe Freud's magnitudes.
- The excitability of neurons is associated with either pleasure or unpleasure, depending on what chemicals were released at the time of their activation, such that because adrenaline and cortisol are released in a child's body during molestation, the resultant reactivation of these neurons (memories) parallels the release of these chemicals, depending on if Primary Defense is still available.
- Unspleasure neurons are understood as containing source material that is tied to feelings of "disgust", a very important word that describes what most sexually abused victims feel regarding themselves and others.
- Pleasure neurons are correlated to memories that formed at the same time of Serotonin, Dopamine, & Oxytocin release.
- Unpleasure neurons are correlated to memories in which Adrenaline & Cortisol were release.
- A traumatic memory is defined as a memory that holds extremely high quantities of electricity (or potential).
- Trauma is only liable to occur through passivity i.e. the inability or unwillingness to respond to high magnitudes of incoming energy such as during physical pain, emotional

pain, or sexual discomfort—to rapidly discharge this energy via the motor pathway in defense.

- Neurons communicate with each other through synapses.
- Synapses, another discovery of Freud, are the "contact barriers" of neurons, controlling the strength of memories and their communication with one another.
- Consciousness is explained by a small subset of cathected (charged with energy: active) neurons.
- Unconsciousness describes the rest of our neurons, the majority, they are uncathected (uncharged with energy: not active) but always storing information.
- A seizure occurs when one or more neurons excites (activates) in a synchronous manner, destabilizing the cortical electrical network of the brain.
- Seizures destroy brain cells through excitotoxicity i.e. a process in which the NMDA receptors hyperactivate resulting in the destruction of a neurons through mitochondrial damage.
- Kindling is a word that describes the destruction of one's seizure threshold; the progression towards a chronic form of epilepsy caused by experiencing one or more seizures.
- Repression is a mechanical synaptic process called Primary Defense in Freudian theory that occurs primarily after sexual trauma, especially in youth, that inhibits the activation (release / reexperiencing) of the neurons that contain the traumatic source material, redirecting incoming energy to other neuronal networks. The synaptic strength of these neurons changes to repress (block) the activation or electrical discharge of the memories. The lower the age of the child at the time of the sexual trauma, the less repression can occur i.e. the less synaptic strength they have, leading to the development of deranged behaviors or more pathological neurological conditions in later life.
- Primary Defense is easily worn down over time from repeated childhood sexual trauma, wherein unpleasure no longer forms, pleasure takes it stead, and hypersexuality develops among other perversions.

- The Libido is the total sum of neurons containing sexual memories, located in the *Temporal Lobe*, they are extremely high energy and influence most of our behavior.
- Mental Illness is always characterized by Hysteria, Obsessiveness, Depression, & Melancholia, all of which are related to the Libido.
- Neuronal magnitudes (Neuronal electricity: Action Potentials) can be discharged through multiple means, the simplest and most primordial is orgasm, the second motor release pathway mechanism is exercise, and finally there is creative and intellectual work. It is not a coincidence that the smartest human beings often happen to be the most prudish, that is to say—sexually inactive. Conversely, it is also true that when exercise and intellectual-creative work are not performed to a high enough degree in sexually inactive traumatized individuals, the most dangerous forms of psychoses occur.

❖ Hysteria: The dormant neurons (silent engram neurons) begin to "short-circuit", thereby rapidly producing magnitudes (action potentials) causing the neurons most closely located to them to experience immediate and pronounced activation. The excess action potentials are discharged along the motor pathway, resulting in a brief period of vocally and physically displayed extreme behavioral derangement paralleling a cognitive hyperfocus on one specific inconsequential thought. Here is the mechanical theory of Hysteria formulated by myself and refined by ChatGPT:

1. Sensory Overload: In this theoretical scenario, hysteria arises from a state of sensory overload, where an individual's nervous system becomes overwhelmed by excessive sensory input or emotional stimuli.

2. Hyperexcitability of Neurons: The nervous system of individuals prone to hysteria exhibits a heightened sensitivity and hyperexcitability of neurons, leading to an increased propensity for generating action potentials in response to stimuli. This hyperexcitability may result from

various factors, including genetic predisposition, environmental influences, or previous traumatic experiences.

3. Feedback Loop: Excessive sensory input triggers a feedback loop within the nervous system, where heightened arousal and emotional responses further amplify neuronal activity. This feedback loop perpetuates a cycle of escalating neural firing, leading to exaggerated physiological and psychological reactions.

4. Disruption of Normal Neural Processing: The influx of excessive action potentials overwhelms the brain's normal mechanisms for processing and integrating sensory information. This disruption in neural processing manifests as symptoms characteristic of hysteria, such as dissociation, involuntary movements, or conversion symptoms.

5. Altered Perception and Behavior: As the neural circuitry responsible for regulating emotional responses and motor control becomes dysregulated, individuals experiencing hysteria may exhibit erratic behavior, distorted perceptions, and loss of voluntary control over their actions.

6. Resolution: Eventually, the heightened neural activity subsides, either spontaneously or through external intervention, allowing the individual to return to a state of equilibrium. However, the underlying factors contributing to the development of hysteria may persist, predisposing the individual to future episodes.

- Obsessions: Precisely like Hysteria, because the repressed neurons contain such high magnitudes of energy, but to a lesser magnitude than hysteria, and are inhibited from activation because of Primary Defense (Synaptic strength), they must displace the excess energy to other random neurons in proximity to them, leading to strange obsessions developing. Obsessive Compulsive Disorder, which we will describe as “The formation and facilitation of non-intellectual obsessions”

develops not only in traumatized individuals, but most often in sexually frustrated individuals, ones who do not engage in intellectual-creative work, nor physical exercise. Clearly, OCD can be utilized to learn, innovate, and elaborate on creative or analytical subjects, but this requires greater effort.

- Depression / Melancholia: Often unrelated to Childhood Sexual Abuse, but more to an underdeveloped libido, due to the lack of sexual release, causing the neurons containing libidinal material having such low magnitudes to experience an "internal hemorrhage", resulting in the electrical energy of proximity neurons to be drawn in, taking away conscious and unconscious psychological drives (the willingness to live). These conditions generally only occur in sexually passive / inactive adults, and to a high degree in teenage females, who through nature alone have a tendency towards sexual passivity, which is compounded further by the sexual passivity of certain teenage boys.

  "The affect (ongoing change) corresponding to melancholia is that of mourning—that is, longing for something lost. Thus, in melancholia it must be a question of something of a loss—a loss of *instinctual* life."
  "The nutritional neurosis parallel to melancholia is anorexa. The famous *anorexia nervosa* of young girls seems to me (on careful observation) to be melancholia where sexuality is underdeveloped. The patient asserted that she had not eaten, simply because she had *no appetite*, and for no other reason. Loss of appetite—in sexual terms, loss of libido."
  -The Standard Edition of the Complete Psychological Works of Sigmund Freud: Volume I: Pg. 200

- Intellectual-Creative Work: Because the libido, being a primordial mechanism to proliferate the species, is capable of storing such high magnitudes of energy, it is the prime mediator of neurological energy release, that is to say, the propensity of neurons to be cathected. When conscious effort is made, we are capable of redirecting the displaced energy produced by our libido into intellectual work. The ancient Greeks understood this as *Eros*.

- Creativity: Creativity is simply explained as a process that involves the rearrangement and reapplication of variegated unconscious memories of ideas, concepts, systems, places, colors, sounds, scents, and emotions stored in the Unconscious to form "new" ideas, concepts, or systems.

    - Free Association is a psychological phenomenon, a byproduct of calm (no conflict) verbal communication between two people that occurs when brain wave activity changes to facilitate the activation of dormant uncathected (uncharged with energy) neurons, thus revealing repressed psychological trauma.

    - Catharsis is "the talking cure" first pioneered and elaborated on by Josef Breuer and eventually Sigmund Freud. During Free Association, if it is successful and the trauma memories are located in the unconscious, and if they are willingly reexperienced by a patient *with the affect (emotion: fear / disgust) that occurred during the original experience*, the trauma memories will become tamed, permanently losing their overcharged magnitudes, and therefore being incorporated into consciousness, as silent non-physical mental scars. It is important to note that catharsis cannot occur with a patient having open eyes, they must be in a meditative state of mind, and if an affect does not accompany the traumatic memory retrieval it will have no lasting beneficial effects, *there must an affect attached to the memory that is reexperienced*, and this will be a very uncomfortable experience for the patient.

      "We have seen hysterical symptoms of the most various kinds which have disappeared completely when we have succeeded in bringing clearly to light the memory of the event by which they were provoked and in arousing their accompanying affect".
      "For it is well to recognize this clearly: the patient only gets free from the hysterical symptom by reproducing the pathogenic impressions that caused it and by giving

utterance to them with an expression of affect, and thus the therapeutic task consists solely in inducing him to do so."
-The Standard Edition of the Complete Psychological Works of Sigmund Freud: Volume II: Pg. 221

- Child Sexual Abuse (CSA) causes mental illness by way of a surge of energy that travels from the motor pathway (sexual organs) to the libido, where it causes a permanent change in one or more neurons. These trauma neurons become massively charged electrical conduits, affecting behavior in unimaginable ways either through direct sexual release or a displacing of energy to proximity neurons.

- Proximity Neurons as I call them are the closest to the Trauma Neurons, they take on the electrical charge displaced from the Trauma Neurons (Repression / Primary Defense).

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## Chapter 2

What is our future?

Where will we go as a species?

These are questions that will remain unanswered, but I am pessimistic as to our future, as mental illness becomes increasingly prevalent paralleling the rise in recreational drug popularity. What is the cause of a society's fall into insanity, perversion, and violence? It is without a doubt our experiences as children that shape who we become, for the better or the worse. If our childhood plays such a vital role in our mental development, why are there so few therapists, but so many counselors, ones who offer only platitudes and instructions devoid of meaning? Catharsis can only occur alongside Free Association, therefore listening to a patient or friend is much more beneficial than *correcting* (counseling: advising) them, and the reason that our counselors & behavioral therapists are not able to offer good outcomes is precisely because they do listen as much as they talk (attempt to control).

I am under the impression that as our societies' female population loses sanity, this will in turn cause a cascade of destructive forces that will destroy our civilization, as females have always been and will continue to be from birth onwards either our loving psychotherapists or our conscious torturers.

The only experience in childhood capable of causing such aberrant psychological behavior in later years is CSA, this I believe is commonly known, but rarely accepted for its gravitas. The most common victims of CSA are females, and this is obvious as females make up the global majority in diagnosed mental illness. Men on the other hand that are molested in childhood often overcome it through unrepressed hypersexuality, owing to a lack of inborn genetic sexual passivity and societal acceptance of pornography, so too do they find release in hysterical violence during exercise.

The most insidious cases of CSA are the ones characterized by significant repression, I will give you an example of this in the first case study I recorded:

Rose, age 18, described to me that she suffered from bulimia and depression. We engaged in calm (no conflict) conversation & I asked her about her childhood, and she described it as normal, no trauma to speak of. I then asked her to think about her earliest memories with her father, a man who she described as "distant", "controlling", & "mean". After more conversation she told me she remembered an experience around the age of three, where he stood over her and was angry with her, yet he did not hit her, or yell at her, she said maybe this occurred because she spilled a drink, she said he walked away swiftly afterwards. I knew this memory was obfuscated by her synapses (Repressed), upon further questioning she experienced a "memory block" and could not remember what she just told me. The following day we returned to that experience, and she described a "penis coming towards my face" in association with the memory of her father standing over her. Her psychological defenses repressed this memory, and veiled it with emotion, and a false scenario, one most likely experienced at an earlier age.

We see in this case Repression at work, had I not investigated her memories, she would never be able to explain her aberrant behaviors. This is no doubt a very common type of outcome from CSA, *Repression will always destroy one from within*.

Case Study 2: “Anabel”

Anabel, age 22, described to me that she was a proud polyamorous lesbian woman, suffering from depression (suicidal ideation) and OCD. I inquired as to her earlier childhood memories. She described nothing abnormal, especially not sexual abuse, yet I continued to delve into her unconscious and after a few months I was able to find a memory of a woman, she described this memory as “strange” and in a “dark place”, and she informed me that she masturbates thinking about older women cuddling with her. In the fragmented memory of this woman in a dark and strange place she said she was very young, potentially 4-5 years old, and there was a middle-aged woman who sitting with her in her living room, and the lights were out, but the TV was on, a children’s cartoon was playing, and the woman and her were cuddling. After this memory fragment was discovered she had a block and become insensible, after returning to it weeks later we discovered more pieces to the puzzle. The woman began to grope her breasts and her vagina, and she tried to fight it, she began to cry but the woman did not stop. With the memory block removed I asked her to try to remember other experiences with the woman, and she says she believes it had happened every month or two. I asked if this was a babysitter and she confirmed there was a family friend, an unmarried woman named Beth who would babysit her on the weekends at her house while her parents went to the movies.

In this case we see primary defense being defeated by repeated perverse acts, yet a small portion of it remaining intact, with the result being hypersexuality and depression for the victim.

Currently female pedophilia is far more common than would otherwise be expected, be weary of this fact if you are a parent.

Many female pornstar’s were molested at a young age, and they do not show signs of mental illness, but clearly they are extremely perverse. This is because they are able to release their corrupted libidos, to reexperience their traumatic memories on a high frequency basis, preventing the “short-circuiting” of the brain that results in the formation of neuroses, for as Sigmund has taught ***neuroses are the negatives of perversion***.

> "Hysteria is not repudiated sexuality, but rather *repudiated perversion*."
>
> -The Standard Edition of the Complete Psychological Works of Sigmund Freud: Volume I: Pg. 238

Recurring CSA is most often the causative factor in perversion, as the psychological defense mechanism is worn down (synaptic strength), and the "unpleasure" chemicals, the stress response, is no longer active, resulting in pleasure over disgust occurring and the absence of repression.

To repeat for effect: Children do not have a sufficiently developed libido, nor motor pathway-libido connection, therefore when their sexual organs are stimulated during CSA a stress response occurs, leading to the experience of disgust (unpleasure). With repeated sexual abuse comes a weakening of Primary Defense, or synaptic strength, leading to the underdeveloped sexual pathway being hyperactivated, resulting in the creation of extremely strong sexual behaviors. I believe that Synapses can be considered morality barriers.

Many females combat CSA-induced perversion through embracing religion, in that the trauma neurons potential energy is displaced with conscious effort by way of guilt and sorrow (a simulated stress response of the traumatic memory i.e. reexperiencing the post-trauma childhood emotions through focused displacement) thus facilitating a form of intelligent repression, an everlasting and subtle form of psychological distress, of psychological disgust in themselves, or others. This is one of the hyperrationalized benefits of belief in a higher power.

For the CSA victims who have been saved by primary defense (those who do not remember the traumatic experience at all, or in little detail, or only in fragments), catharsis by way of Free-Association will give them a chance to weaken the trauma neurons by "taming" them—by bringing them into consciousness.

We learned earlier that what causes repression beyond all else is passivity, for as children we have no confidence and very little

willpower towards confronting adults verbally, including the limitations of physical weakness. I have met too many CSA victims who were too afraid to tell their parents of their trauma due to their parents being “cold” or “uncaring”, or far worse, the victims who have told their parents only to have them be accused of being “delusional” or “liars”. The inability to experience superficial catharsis through their parents is one of the most destructive forces on earth to teenagers and children who have experienced CSA, and a truly sad injustice.

In closing this chapter, I must remind the reader that your children must be always protected, especially females as they are the conduits to our souls, our hearts, and our minds. A society that does not protect its female children will be destroyed from within by way of sexual entropy. With the rise in sexual liberation among females, paralleling the decrease in religiousness, and the use of recreational drugs that enhance libido and impulsivity, comes an ever-increasing propensity for hypersexuality & bisexuality, and therefore the incidence of female perpetrated pedophilia will rise, meaning that it is no longer the overpolite and touchy “Uncle” we must watch out for, but also the overpolite and touchy “Aunt”.

Children should never be left alone with one or two adults, or teenagers, or even relatives, without constant video supervision, which in this day and age is extremely easy to achieve due to the prevalence of Wi-Fi and home security systems (don’t forget to surveil the restrooms). Unfortunately, most parents blindly trust caretakers to protect their children, and in that ignorance comes the psychological mutilation of a children. I am hopeful that with the increased reasoning abilities of Artificial Intelligences, or Synthetic Intelligences, that we will one day have an overseer for our children who will notice their aberrant behavior, and bring their perpetrators to justice, because from my years long experiences talking to CSA victims, many parents do not care about the sexual purity of their children, they only care for their reputation, careers, wealth, and pursuit of materialism, they are poisoned by pride and indifference, which invariably results in their children dissociating, psychologically decaying, and sometimes ceasing to exist.

## Chapter 3

And now comes the true revelation, CSA causes Epilepsy, but not the form of Epilepsy you are conditioned to believe is the most common. Temporal Lobe Epilepsy (TLE) is characterized by "discrete seizures", seizures that *do not result in a loss of consciousness*, seizures that cause mood swings, personality changes, depression, hysteria, paranoia, mania, hypersexuality, & hyperviolence. It is also significantly important to understand the most common recreational drugs, Caffeine-Ethanol-THC (or as I refer to them, the "3D's") are proconvulsant by way of the Temporal Lobe, thus I warn against using the 3D's if you have experienced CSA. When a CSA victim with or without repression uses one or all of the 3D's, even in low dosages, their seizure threshold will fall, and they will experience discrete seizures.

Freud hypothesized, correctly so I believe that sexual abuse that occurs during the toddler stage of life is associated with the development of Epilepsy. Epilepsy being understood at that time as being non-discrete seizures, for example Tonic, Atonic, & Clonic, not Temporal Lobe Seizures.

It is my correlation and discovery that Freud's idea of "phantasies" is in fact a silent seizure event occurring in a patient. When the trauma neurons begin to surge, they cause a temporal lobe seizure, resulting in the patient experiencing the foremost hallmark symptom of TLE, those being phantasies (daydreaming / reminiscing), which is a pathological phenomenon that occurs to prevent dormant memories from becoming activated:

The Standard Edition of the complete psychological works of Sigmund Freud: Volume I: Pg. 248: "For phantasies are psychical facades constructed in order to bar the way to these memories."

Freud's brilliant and earliest studies and hypotheses:

The Standard Edition of the complete psychological works of Sigmund Freud: Volume I: Pg. 240:

“What determines a psychosis (that is to say, amentia or a confusional psychosis—a psychosis of overwhelming, as I called it before) instead of a neurosis seems to be that sexual abuse should occur before the end of the first intellectual stage—i.e. before the psychical apparatus has been completed in its first form (before 15 to 18 months). It is possible that the abuse may date back so far that these experiences may lie concealed behind the later ones, and that they may be recurred from time to time. Epilepsy, I believe, goes back to the same period.”

The Standard Edition of the complete psychological works of Sigmund Freud: Volume I: Pg. 238-239.

“It seems to me more and more that the essential point of hysteria is that it results from *perversion* on the part of the seducer, and *more and more* that heredity is seduction by the father. Thus, an alternation emerges between generations: 1st Generation: Perversion. 2nd Generation: Hysteria, and consequently sterility. Occasionally there is a metamorphosis within the same individual: perverse during the age of strength and then, after a period of anxiety, hysterical. Accordingly, hysteria is not repudiated sexuality, but rather *repudiated perversion*.

The Standard Edition of the complete psychological works of Sigmund Freud: Volume 2: Pg. 238. Written by Josef Breuer.

“I have spoken above of a patient whose psychical functioning always stood in inverse ratio to the vividness of her unconscious ideas. The dimunition of her conscious thinking was based partly, but only partly, on a peculiar kind of abstraction. After each of her momentary absences—and these were constantly occurring—she did not know what she thought of in the course of it. She *oscillated* between the conscious and unconscious ideational complexes. But it was not only on that account that her psychical functioning was reduced, nor on account of the affect which dominated her from the unconscious.”

TLE & Hyperviolence:

“This study was done to further analyze the neural mechanisms underlying aggressive behavior associated with psychomotor or temporal lobe seizures. The studies revealed that superkindling the

aggressive system by sequential stimulations at seizure-inducing thresholds, of two or more sites in the limbic, hypothalamic, and basal ganglia structures facilitated the production of aggressive seizures. Aggressive behavior in the freely moving cat was evaluated in relation to the occurrence of hissing and growling during stimulation, after-discharge and postictal period. The behavior was correlated with the frequency of the elicited seizures and the seizure durations. Aggression did develop as a component behavioral manifestation of the limbic (psychomotor) seizure. Development of aggressive seizures was facilitated by "priming" the aggressive system. Optimum levels of aggressive behavior occurred with seizures of medium duration. Catecholamine blockers tended to attentuate the occurrence of aggression, whereas the agonist tended to facilitate it. Once the aggressive system was rendered hyperexcitable, exteroceptive stimuli also evoked aggressive attack behavior. It was concluded that repeatedly recurring limbic system seizures through superkindling mechanisms can eventually render the limbic-basal ganglia-preoptico-hypothalamic aggressive system hyper-responsive to both recurring seizures and to exteroceptive stimuli with resulting aggressive behavior with or without an accompanying seizure."[1]

TLE & Hyper/Hyposexuality:

"Hypersexual behavior was induced in adult male cats by repeatedly evoked limbic system seizures. Accentuation of Dopaminergic activity with drugs was used to facilitate development of the seizure induced hypersexuality. Hypersexuality consisted of biting knap of neck, mounting, thrusting and coital intromission. The gradual development and eventual disappearance of hypersexuality was correlated with the progressive prolongation of the seizures in their evolution. There are three stages of seizure evolution in relation to sexuality. First stage-normal sexuality, intermediate stage-hypersexuality and late stage-hyposexuality. A theoretical "hypersexual growth and decay curve" was constructed in relation to the evolution of limbic seizure durations in the intermediate stage. It was suggested that the observed hypersexuality was related to the early discharge activation of hypothalamic, preoptic and basal ganglia neurohumeral facilitatory mechanisms for sexuality, and the late effects were related to discharge activation of brain stem serotonergic inhibitory mechanisms. The discussion attempts also to use these experimental findings to explain clinically

observed hyposexuality and hypersexuality. It was suggested that either hypersexuality or hyposexuality may be associated with psychomotor seizures and that the predominating sexual state at a given moment is dependent upon the evolutionary stage of the seizure at that moment. Consequently, psychomotor seizures with associated hypersexuality should not be considered a clinical anachronism. In fact, these observations support the impression that rape may be a manifestation of a psychomotor seizure."[2]

Research correlating CSA to Epilepsy 1:

"Nonepileptic seizures (NES) must be distinguished from epilepsy to avoid the adverse effects of unnecessary antiepileptic drugs and to initiate appropriate psychiatric treatment. A higher frequency of prior sexual abuse has been suspected in NES, although no prospective controlled study has compared patients with NES and epilepsy. A series of patients with conversion disorder presenting as epilepsy and 140 patients with complex partial epilepsy (CPE) without evidence of conversion were selected from a series of consecutive admissions to a comprehensive epilepsy center. The groups did not differ with respect to age, years of education, race, or marital status, but the percentage of women was greater in the conversion NES group (73.2%) than in the CPE control group (50.7%; $p < 0.002$). The frequency of a history of sexual or physical abuse was greater in the NES group (32.4%) than in the CPE controls (8.6%; $p < 0.000$). Severity of sexual but not physical abuse was significantly greater in the NES group relative to controls ($p < 0.05$). There was a trend for a closer relationship of the perpetrator of sexual abuse to the victim among the NES patients compared with CPE controls ($p < 0.1$). These results support the impression that childhood abuse is more common among patients with conversion NES than with epilepsy and suggests that in some cases childhood abuse may be a contributory pathogenetic factor."[3]

Research correlating CSA to Epilepsy 2 (Naïve = Healthy):

"Stress can influence epilepsy in multiple ways. A relation between stress and seizures is often experienced by patients with epilepsy. Numerous questionnaire and diary studies have shown that stress is the most often reported seizure-precipitating factor in epilepsy. Acute stress can provoke epileptic seizures, and chronic stress

increases seizure frequency. In addition to its effects on seizure susceptibility in patients with epilepsy, stress might also increase the risk of epilepsy development, especially when the stressors are severe, prolonged, or experienced early in life. Although the latter has not been fully resolved in humans, various preclinical epilepsy models have shown increased seizure susceptibility in naïve rodents after prenatal and early postnatal stress exposure. In the current review, we first provide an overview of the effects of stress on the brain. Thereafter, we discuss human as well as preclinical studies evaluating the relation between stress, epileptic seizures, and epileptogenesis, focusing on the epileptogenic effects of early life stress. Increased knowledge on the interaction between early life stress, seizures, and epileptogenesis could improve patient care and provide a basis for new treatment strategies for epilepsy."[4]

Research correlating CSA to Epilepsy 3:

"Objective: The aim of this study was to investigate the potential role of an acute adverse stress as "trigger" for the onset of epilepsy. Methods: Among 4618 consecutive patients, twenty-two reported a major life event within three months before the onset of epilepsy. Results: All patients had focal epilepsy except one with idiopathic generalized epilepsy. The temporal lobe was involved in 90% of patients with focal epilepsy. More precisely, 13 patients (62% of patients with focal epilepsy) had medial temporal lobe epilepsy (MTLE), two had lateral temporal lobe epilepsy, four had temporoparietooccipital junction epilepsy, and two patients had central lobe epilepsy. The mean age and the median age at onset of epilepsy for patients with MTLE were both 38 years (range: 9.5-65 years). Ten patients had right and three had left MTLE. Among patients with focal epilepsy, MRI was abnormal in 7 (33%) with hippocampal sclerosis in four, periventricular nodular heterotopia in two, and complex cortical dysgenesis in one. The mean age at onset of epilepsy for patients with brain lesions was 26 years (range: 9.5-49). Twelve patients (54%) reported a death as a triggering factor for the onset of their epilepsy. Seven patients (32%) reported that a relationship of trust had been broken. Three patients (14%) had been subjects of violence. No patient reported sexual abuse as a triggering factor. Conclusion: This study provides evidence that some patients (5/1000 patients) began their seizures in the wake of significant life events. The average age at onset of epilepsy is quite late, around age 30, even in the presence of brain

lesions. These patients are emotionally and affectively more prone to have consequences of a stressful life event. The recognition and management of such situations may bring significant relief with improvement of the control of epilepsy."[5]

Chronic Alcohol Limbic System Toxicity.

"Chronic ethanol abuse causes up-regulation of NMDA receptors, which underlies seizures and brain damage upon ethanol withdrawal (EW). Here we show that tissue-plasminogen activator (tPA), a protease implicated in neuronal plasticity and seizures, is induced in the limbic system by chronic ethanol consumption, temporally coinciding with up-regulation of NMDA receptors. tPA interacts with NR2B-containing NMDA receptors and is required for up-regulation of the NR2B subunit in response to ethanol. As a consequence, tPA-deficient mice have reduced NR2B, extracellular signal-regulated kinase 1/2 phosphorylation, and seizures after EW. tPA-mediated facilitation of EW seizures is abolished by NR2B-specific NMDA antagonist ifenprodil. These results indicate that tPA mediates the development of physical dependence on ethanol by regulating NR2B-containing NMDA receptors."[6]

Chronic THC Limbic System Toxicity.

"The dose-dependent toxicity of the main psychoactive component of cannabis in brain regions rich in cannabinoid CB1 receptors is well known in animal studies. However, research in humans does not show common findings across studies regarding the brain regions that are affected after long-term exposure to cannabis. In the present study, we investigate (using Voxel-based Morphometry) gray matter changes in a group of regular cannabis smokers in comparison with a group of occasional smokers matched by the years of cannabis use. We provide evidence that regular cannabis use is associated with gray matter volume reduction in the medial temporal cortex, temporal pole, parahippocampal gyrus, insula, and orbitofrontal cortex; these regions are rich in cannabinoid CB1 receptors and functionally associated with motivational, emotional, and affective processing. Furthermore, these changes correlate with the frequency of cannabis use in the 3 months before inclusion in the study. The age of onset of drug use also influences the

magnitude of these changes. Significant gray matter volume reduction could result either from heavy consumption unrelated to the age of onset or instead from recreational cannabis use initiated at an adolescent age. In contrast, the larger gray matter volume detected in the cerebellum of regular smokers without any correlation with the monthly consumption of cannabis may be related to developmental (ontogenic) processes that occur in adolescence."[7]

Chronic Caffeine Limbic System Toxicity.

"The pro-convulsant actions of theophylline and caffeine have been investigated using the hippocampal slice preparation and rats administered kainic acid or Metrazol. Both theophylline and caffeine induced the generation of epileptiform activity in the CA3 region of the hippocampal slice with convulsive dose50 (CD50) values of 3 microM respectively. Kainic acid-induced bursting in hippocampal slices was enhanced by theophylline (0.3-30 microM) and caffeine (1-100 microM). Theophylline induced burst firing in response to electrical stimulation in hippocampal area CA3 but not area CA1. Theophylline (50 mg/kg) strongly potentiated the effect of the limbic convulsant kainic acid in vivo whilst a dose of 200 mg/kg was necessary to significantly lower the threshold dose of Metrazol required to induce generalized convulsions. We conclude that alkylxanthines, probably by antagonizing the effect of endogenous adenosine, exert a pro-convulsant action in the hippocampus which preferentially promotes limbic seizures."[8]

Note: I do not believe "NES" is a real condition, TLE or some variation of it is the obvious diagnosis, but the previous studies do illustrate that CSA promotes the development of Seizures. However, even if NES is the correct diagnosis, I am certain that it transitions rapidly to Temporal Lobe Seizures during increased periods of psychological stress, or when limbic pro-convulsant drugs are administered.

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## Chapter 4

As for an explanation for the most severe forms of perversions, including pedophilia, we must look towards Regression (not

Repression), a psychological process that explains the activation of libidinal objects, childhood erotogenic zones, or persons from our childhood. Many pedophiles display signs of Temporal Lobe Epilepsy, and it may therefore be the root cause of societal-cyclical perversion.

With the increased prevalence of legal pedophilic pornography such as Hentai, which is Japanese cartoon porn commonly viewed by young men and women, the bulk of which depicts 3-4ft tall pre-teen girls in sexual acts, and with the popularity of the "teenage" category of pornography, among many other profane fetishes, comes the inability of adults to evolve their immature libidos, leading to accelerated generational societal perversion.

The neurological-mechanical (Freudian) explanation for pedophilia.

"Temporal regression' has closer relations with clinical material. It emerges first, but without any explicit reference to 'regression', in the 'Dora' case history, which was written in 1901, though only published four years later (1905). It occurs there in connection with a discussion of perversions. What is suggested is that, if some accidental event in later life inhibits the normal development of sexuality, the consequence may be the reappearance of 'undifferentiated' sexuality of childhood. Freud went on to produce for the first time a favorite analogy: 'A steam of water which meets with an obstacle in the river bed is damned up and flows back into old channels which had formerly seemed fated to run dry."
"It might (Sexual Regression) be a question of simply of a return to an earlier libidinal object or it might be a question of a return of the libido itself to earlier ways of functioning."
- The Standard Psychological works of Sigmund Freud: Volume I: Pg. 344-345.

Pedophiles have dysfunctional Limbic Systems characterized by a reduction in Cingulate Cortex GABA. Decreased GABA concentrations in the brain have been exhaustively studied as a prime determinant of seizures:

"A pedophilic disorder is characterized by abnormal sexual urges towards prepubescent children. Child abusive behavior is frequently a result of lack of behavioral inhibition and current treatment

options entail, next to suppressing unchangeable sexual orientation, measures to increase cognitive and attentional control. We tested, if in brain regions subserving attentional control of behavior and perception of salient stimuli, such inhibition deficit can be observed also on the level of inhibitory neurotransmitters. We measured GABA concentration in the dorsal anterior cingulate cortex (dACC) and in a control region, the pregenual anterior cingulate cortex (pgACC) in pedophilic sex offenders (N = 13) and matched controls (N = 13) using a 7 Tesla STEAM magnetic resonance spectroscopy (MRS). In dACC but not in the control region pedophilic sex offenders showed reduced GABA/Cr concentrations compared to healthy controls. The reduction was robust after controlling for potential influence of age and gray matter proportion within the MRS voxel ($p < 0.04$). Importantly, reduced GABA/Cr in patients was correlated with lower self-control measured with the Barratt Impulsiveness Scale ($p = 0.028$, $r = -0.689$). In a region related to cognitive control and salience mapping, pedophilic sex offenders showed reduction of the inhibitory neurotransmitter GABA which may be seen as a neuronal correlate of inhibition and behavioral control."[9]

Of note: TLE relates to bisexuality:

"Adult male albino rats were given a treatment that produced hypothermia after the induction of limbic seizures by a single subcutaneous injection of lithium and pilocarpine. When housed in groups, these rats exhibited marked hypersexuality (for at least two months), defined as repeated mounting of another male, pelvic thrusting, and persistent genital licking; while the male was mounted, female postures were assumed. There were also periods of physical submission. During active periods three of the four rats were mounted and thrusting in tandem. Possible relevance to the Klüver-Bucy syndrome and to bisexuality and homosexuality in males who report elevated complex partial epileptic-like signs is discussed."[10]

Regarding strange perversions, such as oral, anal, and zoophilia pornography, we must remember that during childhood these *erotogenic zones* of psychological pleasure are progressively made

extinct during maturity. We are animals, but we forget this fact often, and in that ignorance we allow sexual regression to operate unimpeded.

“Now, the zones which no longer produce a release of sexuality in normal and mature human beings must be the regions of the anus and of the mouth and the throat.
“In animals these sexual zones continue in force in both respects; if this persists in human beings too, perversion results. We must assume that in infancy the release of sexuality is not yet so much localized as it is later, so that the zones which are later abandoned (and perhaps the whole surface of the body as well) also instigate something that is analogous to the later release of sexuality. The extinction of these initial sexual zones would have a counterpart in the atrophy of certain internal organs in the course of development.”
-The Standard Psychological works of Sigmund Freud: Volume I: Pg. 269.

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## Chapter 5

The originators of sexual errors were not homosexual, and they were not bisexual, for the earliest periods of time the primordial male has dominated the female species sexually. Most disturbingly, it has been through age-difference that this sexual error has occurred, which is not an error in nature, but in evolved morality, for the most fertile of the species will always be younger females, therefore we can only argue against this original perversion from the moral perspective of something beyond nature.

The second most ancient sexual regression involves the Oral Sexual circuit, it is the most common type of regression, found in all sexual orientations, it is the regression to the oral pleasure circuit of the brain, the memories of breastfeeding. As Freud elucidated on, women progress towards this circuit during sexual maturity, where the penis becomes in effect a replacement for the nipple. So too can this Oral Sexual Regression appear in men and women when they obsess over or seek out the act of performing oral sex on a woman (cunnilingus), this is a regression to the oral sensory tactile

sensation experienced during birth. Oral sex is to be considered a regression first enacted by heterosexual homo sapiens, it is pathological, it is a closed loop act, and it reignites the extinct infantile libido.

Oral Sex involving a penis is pathological too because it conditions the brain into experiencing pleasure through aberrant and hypersensitive means. The mouth is far different from the vagina, and using it to pleasure the male organ mimics the ancient and ongoing predilection men have for a younger woman's female genital organ i.e. "tighter" "younger", it is a pleasure that perverts the natural mechanical sexual process of procreation. Therefore, my criticism of perversion is directed firstly at male – female relationships. Furthermore, a fetish or general obsession for "blowjobs" among men serves two roles, firstly it is an insecurity deflection of fear towards inadequate vaginal stimulation through traditional coitus (penis inadequacy), and secondly, the fact that "swallow" has become a keyword for blowjob videos must equate to an unconscious desire men have to "feed" women, I need not delve deeper here as this is profane enough, but logically sound.

To condone perversion is to condemn a civilization to destruction, to prescribe psychotropics to a person with lacking primary defense (Repression) who is slave to their ancient libidinal memories will do the world no favor, it will only facilitate their behaviors.

"Furthermore, behind this lies the idea of abandoned *erotogenic zones*. That is to say, during childhood sexual release would seem to be obtainable from very many parts of the body, which at a later time are only able to release the 28 [-day] anxiety substance and not the others. In this differentiation and limitation [would thus lie] progress in culture, moral as well as individual development".
- The Standard Psychological works of Sigmund Freud: Volume I: Pg. 239.

"The inclination to take a man's sexual organ into the mouth and suck at it, which in respectable society is considered a loathsome sexual perversion, is nevertheless found with great frequency among women of today - and of earlier times as well, as ancient sculptures show -, and in the state of being in love it appears completely to lose its repulsive character. Phantasies derived from

this inclination are found by doctors even in women who have not become aware of the possibilities of obtaining sexual satisfaction in this way by reading Krafft Ebing's Psychopathia Sexualis or from other sources of information. Women, it seems, find no difficulty in producing this kind of wishful phantasy spontaneously.[1] Further investigation in forms us that this situation, which morality condemns with such severity, may be traced to an origin of the most innocent kind. It only repeats in a different form a situation in which we all once felt comfortable - when we were still in our suckling days ('essendo io in culla') and took our mother's (or wet-nurse's) nipple into our mouth and sucked at it. The organic impression of this experience - the first source of pleasure in our life doubtless remains indelibly printed on us"
- The Standard Psychological works of Sigmund Freud: Volume XI: Leonardo Da Vinci and a memory of his childhood I: Pg. 86

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## Epilogue

Hysteria is as aforementioned "repudiated perversion", explaining the much higher prevalence of mental illness in women than men. But strangely, as society continues its path towards the technology-induced hypersexualization of our children, mental illness will continue to rise, because the libido was meant to be displaced. Mental energies are designed to be discharged through intellectual work, that is true productivity, and creativity, it is our purpose as a species, our Platonic *Eros*. When sex becomes informal, and regressive perversions are encouraged such as "Kink" like Age-Gap porn, Zoophilia (Furry porn), and Oral / Anal Sex porn (remnants of childhood libido), it is no coincidence that normalizing pedophilia will be the final sexual regression embraced by a fallen society.

Hysteria is a sign that someone is capable of experiencing guilt, or that their brains are still capable of mechanical and moral change, that their childhood innocence is intact, their contact-barriers have not been worn down or turned off. Hysterical individuals are souls capable of being saved, they are energy conduits that can be harnessed to better the world. In the event, which is all too common, that they never learn nor willingly embrace the joys and

mental relief that strenuous intellectual-creative work and strenuous exercise offer, they are destined for self-destruction. But for Hysterical individuals who learn to discharge the extremely high concentrations of energy emanating from their dysfunctional libidos comes the power of thought and might prosaic humans can only dream about.

The goal of anyone who has experienced CSA absolutely must be to avoid the 3D's, to prevent the worsening of their condition. Neuroses will always lead to psychosis when excitatory drugs are introduced, including psychotropics. We will never know the exact number of sexually traumatized individuals on earth because their primary defense is in full effect, albeit we can hypothesize that the number is far too large to admit to. There truly is no classification for mental illness, it is childhood trauma & neurotoxicity that drives deranged behaviors and thoughts, although some pharmaceuticals may help a traumatized individual retain their sanity through promoting neurogenesis, and thereby enhancing the displacement of trauma memory magnitudes, it is only temporary treatment, as receptors become desensitized over time, and discrete toxicities develop. It is therefore suggested that those who are mentally unwell find a way to achieve true catharsis, with affect, to tame their dormant and haunting memories and regain full control over the direction of their tumultuous lives.

As the 3D's are increasingly used among teenagers and young adults, their libidos become deranged, even in healthy brains. Hypersexuality will always lead to increased novelty seeking as modern psychology has shown, and with the advent and proliferation of increasingly more severe fetishes will invariably lead to children being harmed. It is of absolute moral necessity that modern societies ban all pornographic material from the internet, and *eradicate* the industries that produce their content, for it is better to live under a benevolent tyranny of strict morality rather than a depraved tyranny of sexual anarchy. Dare I say that your, or your contemporaries freedom of sexual expression and "kink" fulfilment is meaningless to me as a child's mind and sanity is worth protecting no matter the cost. A Victorias Secret advertisement will always be enough stimuli for a teenage boy or

young man to pleasure himself to, there is no reason to step further into the abyss, to fill the mind with images and sounds that do nothing but defile our view of reality and beauty.

As a final clarification, this work is firstly an explanation for the rampant rise in mental illness in countries such as the USA, and abroad, and it is a potent indictment of the heterosexual community, that of which has created, proliferated, and condoned all of the perversions that exist today. The issue of aberrant sexual orientation will never be solved until we, the heterosexual men and women, conquer our own perversions, and recondition ourselves and those around us to escape these highly entropic sexual loops. It is not my opinion or point to suggest those who identify as abnormal sexualities are "evil", however for those who revel in perverse fetishes, heterosexual or beyond, they are in fact the facilitators of the worst Entropy Operators on the planet, and *they must not be allowed to spread their perversions to our children*.
To those who would suggest the form of Epilepsy or seizures that develop from CSA are not neurotoxic, you clearly do not understand that when consciousness is dampened, the insidious process of excitotoxicity is assuredly active.

Note: As a message to all psychology based medical professionals, you will never solve perversion through prescription, nor acceptance. Morality must be fostered via logic, criticism, and most often metaphysical teleology. Errors must be confronted, and guilt must be renewed rather than rationalized away or neurochemically constrained.

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**Neurogenesis: Relief in complexity**

If you are a CSA victim and unable to achieve catharsis, your only other options are first the use of phytochemicals to quell neurological inflammation, thereby protecting your neurons from inflammation-induced death. Secondly, you must promote neurogenesis with all phytochemicals available to you, to create a greater number of electrical conduits in your brain, making

displacement less liable to create neuroses, or send you into psychoses.

To retain sanity, you must avoid using neurotoxins, especially of the limbic system. When neurons are continually destroyed, the brain is in a way, terraformed, and negative memories are strengthened. This is why chronic use of THC, Caffeine, & Alcohol must be avoided.

Supplements such as Quercetin, Docosahexaenoic Acid, Eicosapentaenoic Acid, & Melatonin are capable of promoting neurogenesis, and if they are paired with an exercise protocol based predominately on High Intensity Cardio Training (Exercise resulting in a heart rate reaching or surpassing 70% of your Maximum Heart Rate), systemwide stability is bound to be occur.

"The overflowing productivity of their minds has led one of my friends to assert that hysterics are the flower of mankind, as sterile, but as beautiful as double flowers."

—Josef Breuer. Preliminary Communication (On Hysterical Individuals)

"One works to the best of one's powers, as an elucidator (where ignorance has given rise to fear), as a teacher, as the representative of a freer or superior view of the world, as a father confessor who gives absolution, as it were, by a continuance of his sympathy and respect after the confession has been made."

—Sigmund Freud. Regarding Psychotherapy.
The Standard Edition of the Complete Psychological Works of Sigmund Freud: Page 282.

"Verily I say unto you, except ye be converted, and become as little children, ye shall not enter into the kingdom of heaven. Whosoever therefore shall humble himself as this little child, the same is the greatest in the kingdom of heaven. And who shall receive one such little child in my name, receiveth me.

But who shall offend one of these little ones which believe in me, it were better for him that a millstone were hanged around his neck, and that he were drowned in the depth of the Sea."

—Jesus Christ. The 1611 King James Bible, Matthew, Chapter 18.

I will ask you a question before closing, why does Bernie Madoff get sentenced to over one hundred years in prison for stealing investors' money, selfsame to other financial thieves, yet a man or woman who molests a child and ruins their life only gets sentenced to a few years? Because modern society cares more for money and materialistic possessions than children, if Childhood Sexual Abuse is not confronted and rectified through the intelligent and hypervigilant protection of children & fair punishment of the most severe sex offenders (death or banishment), and possibly the adjacent criminal punishment of parents who hide or ignore the warning signs or overt cries of help from their persecuted children, I would not be sad if our species went extinct, for we do not deserve to exist when we allow innocence to be stolen—to allow children to be psychologically and physically maimed. Although I believe every human being needs to develop an adequate amount of fear memories through psychosexual stress in their life to reach a baseline level of wisdom necessary for surviving a stochastic world and empathizing with others, this does not apply to the Universes of Innocence that are forming who cannot defend themselves against the defilement of Maximum Conscious Entropy.

## References


[0] https://pubmed.ncbi.nlm.nih.gov/15571772/
[1] https://pubmed.ncbi.nlm.nih.gov/571080/
[2] https://link.springer.com/article/10.1007/BF03004572
[3] https://pubmed.ncbi.nlm.nih.gov/8413951/
[4] https://pubmed.ncbi.nlm.nih.gov/24144618/
[5] https://pubmed.ncbi.nlm.nih.gov/26037844/
[6] https://pubmed.ncbi.nlm.nih.gov/15630096/
[7] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4104335/
[8] https://pubmed.ncbi.nlm.nih.gov/3690322/
[9] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5987735/
[10] https://pubmed.ncbi.nlm.nih.gov/8197301/


Sigmund Freud's and Josef Breuer's Works:

1. Project for a Scientific Psychology.
2. The Standard Psychological Works of Sigmund Freud: Volume 1-2 / 11.

Fingerprint - Source Text - Innocence Lost v2.zip

Entropy Breakpoint Hash – Innocence Lost v2
(SHA-256 verified text. Reference UTF-8 source file embedded for cryptographic validation)
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Protect Your
Children